Fill in this information to identify your o	case:
United States Bankruptcy Court for the: DISTRICT OF NEVADA	
Case number (if known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13

Official Form 101

Part 1:

Identify Yourself

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Your full name Write the name that is on your **ASHLEY** government-issued picture First Name First Name identification (for example, MARIE your driver's license or Middle Name Middle Name passport). SORIANO Last Name Bring your picture Last Name identification to your meeting with the trustee. Suffix (Sr., Jr., II, III) Suffix (Sr., Jr., II, III) All other names you have used in the last 8 First Name First Name years Middle Name Middle Name Include your married or maiden names. Last Name Last Name 3. Only the last 4 digits of $xxx - xx - \underline{5} \underline{4} \underline{8} \underline{3}$ xxx - xx - ____ ___ ____ your Social Security number or federal OR OR Individual Taxpaver Identification number 9xx - xx - ___ 9xx - xx -(ITIN) 4. Any business names I have not used any business names or EINs. ☐ I have not used any business names or EINs. and Employer **Identification Numbers** Business name Business name

(EIN) you have used in the last 8 years

Include trade names and doing business as names

Business name

Business name

Business name

Business name

Debtor 1		ASHLEY MARIE SO	ORIANO		Case nu	Case number (if known)			
			About Debtor 1:		Abo	out Debtor 2 (Spouse Only in a Joint Case):			
			<u></u>		EIN				
5.	Where	you live	2			ebtor 2 lives at a different address:			
			1850 SELMI DR	2 APT A108					
			Number Street		Num	nber Street			
			DENO	NV 90542					
			RENO City	NV 89512 State ZIP Code	— City	State ZIP Code			
			WASHOE						
			County		Cou	nty			
			If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number Street P.O. Box			If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.			
						nber Street			
						P.O. Box			
			City	State ZIP Code	City	State ZIP Code			
6.		u are choosing	Check one:			Check one:			
	this dis bankru	strict to file for ptcy ☑		t 180 days before filing this ve lived in this district longe other district.	r 🗆	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
			I have anothe (See 28 U.S.	er reason. Explain. .C. § 1408.)		I have another reason. Explain. (See 28 U.S.C. § 1408.)			
Р	art 2:	Tell the Court A	About Your Bankru	uptcy Case					
7.	Bankru	apter of the ptcy Code you				quired by 11 U.S.C. § 342(b) for Individuals Filing and check the appropriate box.			
	are cho	osing to file							
	4401		☐ Chapter 11						
			_						
			Chapter 12						
			Chapter 13						

Deb	tor 1 ASHLEY MARIE S	ORIANO		Case number (if known)			
8.	How you will pay the fee	court pay w	ill pay the entire fee when I file my petition. Please check with the clerk's office in your local art for more details about how you may pay. Typically, if you are paying the fee yourself, you may with cash, cashier's check, or money order. If your attorney is submitting your payment on your half, your attorney may pay with a credit card or check with a pre-printed address.				
			d to pay the fee in installments. If you	•	•		
		By law than 1 fee in	west that my fee be waived (You may, a judge may, but is not required to 150% of the official poverty line that a installments). If you choose this opton Fee Waived (Official Form 103B) and	, waive your fee, and rapplies to your family sion, you must fill out t	nay do so only if your income is less size and you are unable to pay the ne Application to Have the Chapter 7		
9.	Have you filed for	☑ No					
	bankruptcy within the last 8 years?	Yes.					
		District		When	Case number		
		5 1.1.		MM / DD /			
		District		When MM / DD /	YYYY Case number		
		District		When	Case number		
10.	Are any bankruptcy	☑ No					
	cases pending or being filed by a spouse who is	Yes.					
	not filing this case with	Debtor		Rela	ationship to you		
	you, or by a business partner, or by an	District		When	Case number,		
	affiliate?	_			YYYY if known		
		Debtor		Rel	ationship to you		
		District		When	Case number, if known		
11.	Do you rent your residence?	□ No. ☑ Yes.	Go to line 12. Has your landlord obtained an evict	ion judgment against	you?		
			No. Go to line 12. Yes. Fill out Initial Statement and file it as part of this bankru		gment Against You (Form 101A)		

Debtor 1		ASHLEY MARIE SORIANO			Case number (if known)					
P	art 3:	Report About Ar	ıy Bı	usine	sses You Own as a	Sole Pro	prietor			
12.	-	a sole proprietor ull- or part-time ss?			Go to Part 4. Name and location of b	usiness				
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.				Name of business, if any Number Street					
	sole pro	ave more than one prietorship, use a e sheet and attach it etition.			City Check the appropriate Health Care Busin Single Asset Rea Stockbroker (as d Commodity Broke	ness (as defi l Estate (as defined in 11 er (as defined	ned in 11 U.S.C. defined in 11 U.S U.S.C. § 101(53)	§ 101(27A)) .C. § 101(51B) A))	ZIP Cod	de
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business		can mos	set ap st recei	filing under Chapter 11, propriate deadlines. If y nt balance sheet, statem these documents do no	ou indicate ent of opera	that you are a sm tions, cash-flow s	nall business de statement, and	ebtor, you federal ind	must attach your come tax return
	debtor?		No.	I am not filing under Cl	napter 11.					
	For a definition of small business debtor, see 11 U.S.C. § 101(51D).		No.	I am filing under Chapt the Bankruptcy Code.	er 11, but I a	am NOT a small b	ousiness debto	r accordin	g to the definition in	
		C. § 101(51D).		Yes.	I am filing under Chapt Bankruptcy Code.	er 11 and I a	am a small busine	ess debtor acco	ording to th	ne definition in the
Pa	art 4:	Report If You Ov	vn o	r Hav	e Any Hazardous F	Property o	r Any Proper	ty That Nee	ds Imm	ediate Attention
14.	property alleged immine	o you own or have any roperty that poses or is leged to pose a threat of nminent and identifiable		No Yes.	What is the hazard?					
	safety? any pro	to public health or Or do you own perty that needs ate attention?			If immediate attention	is needed, w	hy is it needed?			
	perishal livestoci	mple, do you own ole goods, or k that must be fed, or ng that needs urgent			Where is the property?	Number	Street			
						City			State	ZIP Code

Debtor 1 **ASHLEY MARIE SORIANO** Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

 I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

 □ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not require	d to receive a briefing about				
credit counseling because of:					
- Inconscitu	I have a montal illness or a ma				

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making

rational decisions about finances.

 □ Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case): You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

 □ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing abou
credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

 □ Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1		ASHLEY MARIE SO	0		Case number (if known)				
P	art 6:	Answer These G	Questi	ons for Reporting Pเ	ırpos	ses			
16.	What k have?	ind of debts do you	16a.		dual p	sumer debts? Consumer de imarily for a personal, family,		re defined in 11 U.S.C. § 101(8) usehold purpose."	
			16b. 16c.	money for a business or No. Go to line 16c. Yes. Go to line 17.	invest	iness debts? Business debt ment or through the operation e that are not consumer or bus	of th		
17	Are vo	u filing under							
	Chapte	•	☐ No. I am not filing under Chapter 7. Go to line 18.						
	any exc exclude admini- are pai availab	estimate that after empt property is ed and strative expenses d that funds will be ble for distribution ecured creditors?	\square		•	•	-	xempt property is excluded and to distribute to unsecured creditors?	
18.		any creditors do timate that you		1-49 50-99 100-199 200-999		1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000	
19.		uch do you te your assets to th?		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
20.		uch do you te your liabilities to		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	

Debtor 1	ASHLEY MARIE S	ORIANO	Case number (if known)			
Part 7:	Sign Below					
or you		I have examined this petition, and I declare and correct.	under penalty of perjury that the information provided is true			
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.				
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).				
		I request relief in accordance with the chapte	er of title 11, United States Code, specified in this petition.			
		•	ealing property, or obtaining money or property by fraud in t in fines up to \$250,000, or imprisonment for up to 20 years, 3571.			
		X /s/ ASHLEY MARIE SORIANO ASHLEY MARIE SORIANO, Debtor 1	XSignature of Debtor 2			
		Executed onMM / DD / YYYY	Executed on			

Debtor 1	ASHLEY MARIE SORIANO		Case number (if known)		
F		I the attender to the delicate and the delicate	- CC de de se de de la la calacte		

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Nathan R. Zeltzer		Date	
Signature of Attorney for Debtor			MM / DD / YYYY
Nathan R. Zeltzer Printed name			
The Law Office of Nathan R. Zeltzer, I	Ltd		
232 Court St.			
Number Street			
Reno	NV		89501
City	State		ZIP Code
Contact phone (775) 786-9993	Email address _		
5173	NV		
Bar number	State		_

Fill in this inf	formation to id	lentify your cas	e and this filing:		
Debtor 1	ASHLEY	MARIE	SORIANO		
Debter 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ba	inkruptcy Court for	the: DISTRICT OF	NEVADA		
Case number				☐ Chock	if this is an
(if known)			_	_	ed filing
Official Form	1064/B				
Schedule A		1			12/15
the asset in the ca filing together, bo	ategory where you	u think it fits best. sponsible for suppl	List an asset only once. If an ass Be as complete and accurate as ying correct information. If more s, write your name and case numb	possible. If two married pe space is needed, attach a s	eople are separate
Part 1: De	scribe Each R	esidence, Build	ing, Land, or Other Real Es	tate You Own or Have	an Interest In
✓ No. Go	or have any legal to Part 2. here is the propert	·	st in any residence, building, land	l, or similar property?	
	-	•	II of your entries from Part 1, including the state of th		\$0.00
Part 2: De	scribe Your V	ehicles			
you own that some	eone else drives.	•	in any vehicles, whether they are a laso report it on Schedule G: Executive, motorcycles	_	
□ No ☑ Yes					
3.1. Make:	HONDA	Who has	s an interest in the property?	Do not deduct secured clair amount of any secured clair	ms on Schedule D:
Model:	ACCORD		tor 1 only	Creditors Who Have Claim	
Year:	2009		tor 2 only tor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
Approximate milea	ige:		east one of the debtors and another	\$3,000.00	\$3,000.00
Other information: 2009 HONDA AONAME ONLY)	CCORD (HUSB	— AND ☑ Che	ck if this is community property instructions)		
3.2. Make:	ACURA	Who has Check o	s an interest in the property? ne.	Do not deduct secured clair amount of any secured clair	•
Model:	MDX	Deb	tor 1 only	Creditors Who Have Claim	s Secured by Property.
Year:	2012		tor 2 only	Current value of the	Current value of the
Approximate milea			tor 1 and Debtor 2 only	entire property?	portion you own?
Other information:	<u> </u>	At 16	east one of the debtors and another	\$10,000.00	\$10,000.00
2012 ACURA MI	DX		ck if this is community property instructions)		

Deb	tor 1	ASHLEY MARIE SORIANO Case number (if known)	
4.		aft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories es: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories	
5.		dollar value of the portion you own for all of your entries from Part 2, including any for pages you have attached for Part 2. Write that number here	\$13,000.00
Pa	art 3:	Describe Your Personal and Household Items	
Do	ou own		Current value of the portion you own? Do not deduct secured claims or exemptions.
6.		old goods and furnishings es: Major appliances, furniture, linens, china, kitchenware	
		Describe HOUSEHOLD GOODS AND FURNISHINGS	\$2,000.00
7.	Electron Example	nics es: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games	
	✓ No ☐ Yes	. Describe	
8.	Example	bles of value es: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	
	✓ No ☐ Yes	. Describe	
9.		ent for sports and hobbies es: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
	✓ No ☐ Yes	. Describe	
10.	Firearm Example	s es: Pistols, rifles, shotguns, ammunition, and related equipment	
	✓ No ☐ Yes	. Describe	
11.	Clothes Example	es: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	□ No ✓ Yes	. Describe FAMILY CLOTHING	\$200.00
12.	Jewelry Example	es: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver	
	✓ No ☐ Yes	. Describe	

Deb	tor 1	ASHLEY MA	RIE SORIA	NO	Case number (if known)	
13.	Example	m animals es: Dogs, cats,	, birds, horses	3		
	✓ No ☐ Yes	. Describe				
14.	did not	-	nd househol	d items you did not already list	t, including any health aids you	
		. Give specific				
15.			-	_	any entries for pages you have	\$2,200.00
Pa	art 4:	Describe '	Your Finar	ncial Assets		
		or have any le	egal or equita	able interest in any of the follow	wing?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	•	es: Money you petition	have in your	wallet, in your home, in a safe d	eposit box, and on hand when you file your	
	✓ No ☐ Yes				Cash:	
17.	•	-	houses, and o		es of deposit; shares in credit unions, nave multiple accounts with the same	
	□ No ☑ Yes			Institution name:		
	17.	1. Checking	account:	CHIME (ONLINE BANKIN	G)	\$10.00
18.		mutual funds,		raded stocks accounts with brokerage firms, r	noney market accounts	
	☑ No			on or issuer name:	·	
19.	-	-		erests in incorporated and unit and joint venture	ncorporated businesses, including	
	info	. Give specific rmation about n		f entity:	% of ownership	:
20.	Negotial	ble instruments	s include pers		negotiable instruments bromissory notes, and money orders. The by signing or delivering them.	
	info	. Give specific rmation about n		ame:		

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Deb	tor 1	ASHLEY MARIE SORIANO Case number (if known	ı)	
21.		nent or pension accounts es: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans		
	acc	. List each ount separately. Type of account: Institution name:		
22.	Your sh Exampl	y deposits and prepayments are of all unused deposits you have made so that you may continue service or use from a company es: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunication iles, or others		
	☐ No			
	∀ Yes	Institution name or individual:		
		Security deposit on rental unit: Security deposit on rental unit		\$400.00
23.	Annuiti No	es (A contract for a specific periodic payment of money to you, either for life or for a number of year	ars)	
	Yes	Issuer name and description:		
24.		is in an education IRA, in an account in a qualified ABLE program, or under a qualified state t \mathbb{C} . §§ 530(b)(1), 529A(b), and 529(b)(1).	uition pro	ogram.
	✓ No ☐ Yes		11 U.S.C.	§ 521(c)
25.		equitable or future interests in property (other than anything listed in line 1), and rights or exercisable for your benefit		
		s. Give specific rmation about them		
26.		es: Internet domain names, websites, proceeds from royalties and licensing agreements		
	√ No			
	Yes	. Give specific rmation about them		
27.		es, franchises, and other general intangibles es: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, profession	onal licens	ses
	☑ No			
	_	Give specific		
		rmation about them		
WOT	ey or pr	operty owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	unds owed to you		
	✓ No	Cive appoints information]	
		. Give specific information ut them, including whether	Federal:	:
	you	already filed the returns	State:	
	and	the tax years	Local:	

Deb	otor 1 ASHLEY MARIE SORIANO)	Case number (if known)	
29.		ony, spousal support, child support, mainte	enance, divorce settlement, property set	lement
	✓ No ☐ Yes. Give specific information		Alimony:	
			Maintenance:	
			Support:	
			··	
20	Other amounts someone owes you		Troperty settlement.	
30.	Examples: Unpaid wages, disability in compensation, Social Sect	surance payments, disability benefits, sick urity benefits; unpaid loans you made to so		
	✓ No ☐ Yes. Give specific information			
31.	Interests in insurance policies Examples: Health, disability, or life insurance policies	urance; health savings account (HSA); cre	dit, homeowner's, or renter's insurance	
	✓ No Yes. Name the insurance company of each policy and list its value	pany name: E	Beneficiary: Surrenc	der or refund value:
32.	Any interest in property that is due y If you are the beneficiary of a living tru entitled to receive property because so	st, expect proceeds from a life insurance pe	olicy, or are currently	
	✓ No☐ Yes. Give specific information		_	·
33.		r or not you have filed a lawsuit or made putes, insurance claims, or rights to sue	a demand for payment	
	✓ No ☐ Yes. Describe each claim	_	_	
34.	Other contingent and unliquidated crights to set off claims	laims of every nature, including countere	claims of the debtor and	
	✓ No ☐ Yes. Describe each claim			
35.	Any financial assets you did not alre	eady list		
	✓ No✓ Yes. Give specific information			
36.	-	tries from Part 4, including any entries for		\$410.00
Pa	art 5: Describe Any Business	Related Property You Own or Ha	ve an Interest In. List any real	estate in Part 1.
37.	Do you own or have any legal or equ	uitable interest in any business-related p	roperty?	
	✓ No. Go to Part 6. ☐ Yes. Go to line 38.			

Deb	tor 1	ASHLEY MARIE SORIANO	Case number (if known)	
				Current value of the portion you own? Do not deduct secured claims or exemptions.
38.		nts receivable or commissions you already earned		
	✓ No ☐ Yes	s. Describe]
39.		equipment, furnishings, and supplies les: Business-related computers, software, modems, printers, copiers, factorists, chairs, electronic devices	x machines, rugs, telephones,	
	✓ No ☐ Yes	s. Describe]
40.	Machin	ery, fixtures, equipment, supplies you use in business, and tools of	your trade	
	✓ No ☐ Yes	s. Describe]
41.	Invento	ory		
	✓ No ☐ Yes	s. Describe]
42.	Interest	ts in partnerships or joint ventures		
	✓ No ☐ Yes	s. Describe Name of entity:	% of ownership:	
43.	Custom	ner lists, mailing lists, or other compilations		
	▼ No Yes	s. Do your lists include personally identifiable information (as define No Yes. Describe	d in 11 U.S.C. § 101(41A))?]
44.	Any bus	siness-related property you did not already list		_
	✓ No ☐ Yes	s. Give specific information.		
45.		e dollar value of all of your entries from Part 5, including any entries d for Part 5. Write that number here		\$0.00
Pa		Describe Any Farm- and Commercial Fishing-Related Polify you own or have an interest in farmland, list it in Part 1.	roperty You Own or Have a	n Interest In.
46.	Do you	own or have any legal or equitable interest in any farm- or commerce	ial fishing-related property?	
		Go to Part 7. s. Go to line 47.		

Deb	tor 1 ASHLEY MARIE SORIANO	Case number (if known)	
47.	Farm animals		Current value of the portion you own? Do not deduct secured claims or exemptions.
	Examples: Livestock, poultry, farm-raised fish		
	✓ No Yes]
48.	Cropseither growing or harvested		
	✓ No Yes. Give specific information]
49.	Farm and fishing equipment, implements, machinery, fixtures, and tools of	of trade	
	✓ No		
	Yes		
50.	Farm and fishing supplies, chemicals, and feed		_
	✓ No ☐ Yes]
51.	Any farm- and commercial fishing-related property you did not already lis	t	_
	☑ No		_
	Yes. Give specific information		
52.	Add the dollar value of all of your entries from Part 6, including any entrie attached for Part 6. Write that number here		\$0.00
Pa	art 7: Describe All Property You Own or Have an Interest in	That You Did Not List Above	
53.	Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership		
	✓ No ☐ Yes. Give specific information.		
54.	Add the dollar value of all of your entries from Part 7. Write that number h	nere→	\$0.00

Debtor 1	ASHLEY MARIE SORIANO	Case nu	umber (if known)		
Part 8:	List the Totals of Each Part of this Form				
55. Part 1	1: Total real estate, line 2		 →		\$0.00
56. Part 2	2: Total vehicles, line 5	\$13,000.00			
57. Part 3	3: Total personal and household items, line 15	\$2,200.00			
58. Part 4	4: Total financial assets, line 36	\$410.00			
59. Part 5	5: Total business-related property, line 45	\$0.00			
60. Part 6	6: Total farm- and fishing-related property, line 52	\$0.00			
61. Part 7	7: Total other property not listed, line 54	+\$0.00			
62. Total	personal property. Add lines 56 through 61	\$15,610.00	Copy personal property total	+ \$15,6	10.00
63. Total	of all property on Schedule A/B. Add line 55 + line 62.			\$15,6	10.00

Fill in this in	formation to i	dentify your	case:				
Debtor 1	ASHLEY	MARIE	SORIANO)			
Debtor 2	First Name	Middle Name	e Last Name				
(Spouse, if filing	First Name	Middle Name	e Last Name				
United States Ba	ankruptcy Court fo	r the: DISTRIC	T OF NEVADA			☐ Check if this is an	
Case number (if known)						amended filing	
Official Form	n 106C				_		
Schedule C	: The Prope	erty You Cl	aim as Exemp	ot			04/19
Using the property	y you listed on <i>Sci</i> fill out and attach	nedule A/B: Prop to this page as m	erty (Official Form 10	6A/B)	as your source, lis	lly responsible for supplying correct infost the property that you claim as exemp becessary. On the top of any additional	t. If more
is to state a spec exempted up to t receive certain be exemption of 100	sific dollar amoun the amount of any enefits, and tax-e 0% of fair market	t as exempt. Al applicable stat xempt retirement value under a la	ternatively, you may tutory limit. Some ex nt fundsmay be unl aw that limits the exe	claii cemp imite mpti	n the full fair marl tionssuch as the d in dollar amoun on to a particular	on you claim. One way of doing so ket value of the property being ose for health aids, rights to tt. However, if you claim an dollar amount and the value of the cable statutory amount.	
Part 1: Ide	entify the Pro	perty You Cla	aim as Exempt				
1. Which set of	f exemptions are	you claiming?	Check one only,	even	if your spouse is fi	ling with you.	
النتا	claiming state and claiming federal e		kruptcy exemptions. J.S.C. § 522(b)(2)	11 U	S.C. § 522(b)(3)		
2. For any proj	perty you list on	Schedule A/B th	nat you claim as exer	npt, 1	ill in the informati	ion below.	
Brief description Schedule A/B tha	of the property a	nd line on	Current value of the portion you own	Am	ount of the mption you claim	Specific laws that allow exemp	tion
			Copy the value from Schedule A/B		eck only one box fo h exemption	r	
Brief description: 2012 ACURA M	IDX		\$10,000.00	☑	\$10,000.00 100% of fair mark	Nev. Rev. Stat. § 21.090(1)(f), (p)
Line from Schedu	ele A/B:				value, up to any applicable statuto limit		
Brief description:			\$2,000.00	V	\$2,000.00	Nev. Rev. Stat. § 21.090(1)(t)
HOUSEHOLD G		RNISHINGS			100% of fair mark value, up to any applicable statuto limit		
(Subject to a	djustment on 4/01	/22 and every 3 y	more than \$170,350° years after that for cas	ses fi			

Debtor 1 ASHLEY	MARIE SORIANO		Case number	(if known)
Part 2: Additi	onal Page			
Brief description of th Schedule A/B that list	e property and line on s this property	Current value of the portion you own	 ount of the mption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	eck only one box for h exemption	
Brief description: FAMILY CLOTHING Line from <i>Schedule A/E</i>		\$200.00	\$200.00 100% of fair market value, up to any applicable statutory limit	Nev. Rev. Stat. § 21.090(1)(b)
Brief description: CHIME (ONLINE BA Line from Schedule A/E	-	\$10.00	\$7.50 100% of fair market value, up to any applicable statutory limit	Nev. Rev. Stat. § 21.090(1)(g)
Brief description: Security deposit on Line from Schedule A/b		\$400.00	\$400.00 100% of fair market value, up to any applicable statutory limit	Nev. Rev. Stat. § 21.090(1)(n)

ASHLEY First Name if filing) First Name tates Bankruptcy Comber	Middle N	SORIANO				
First Name , if filing) First Name tates Bankruptcy C	Middle N					
, if filing) First Name tates Bankruptcy C						
mber		lame Last Name				
mber	ourt for thos DICTE	UCT OF NEVADA				
	ourt for the: DISTE	ICT OF NEVADA				
1)			_		Check if this i amended filin	
Form 106D						
ule D: Credi	tors Who Ha	ve Claims Secure	d by Prope	rty		12/15
formation. If more of of any additional of any additional on the control of the c	e space is needed, pages, write your claims secured by and submit this for e information below	copy the Additional Page, name and case number (if your property? m to the court with your othe	fill it out, numbe known).	er the entr	ies, and attach it to th	is form.
LIST All Set	ureu Ciaiiris					
, list the creditor se or has a particular	parately for each clauding list the other e claims in alphabe	aim. If more than one creditors in Part 2. As ical order according to the	Amount Do not de	of claim educt the	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
		• • •				
ame						
Street						
	ZIP Code	Contingent Unliquidated Disputed		that apply.		
	ıly 🔲	An agreement you made (su Statutory lien (such as tax li Judgment lien from a lawsui	ıch as mortgage en, mechanic's li t		d car loan)	
t if this claim relat		Other (including a right to or	rset)			
ommunity debt		t 4 digits of account number	~r			
in first and in the second sec	plete and accurate formation. If more of any additional my creditors have to the control of the	plete and accurate as possible. If the formation. If more space is needed, to of any additional pages, write your by creditors have claims secured by No. Check this box and submit this for Yes. Fill in all of the information below. List All Secured Claims Il secured claims. If a creditor has many list the creditor separately for each claim or has a particular claim, list the other has a possible, list the claims in alphabet or's name. Despective to the debt? Check one. State ZIP Code As one of the debtors and another and the control of the debtors and another another and the control of the debtors and another another another another another another and the control of the debtors and another ano	plete and accurate as possible. If two married people are filling formation. If more space is needed, copy the Additional Page, of any additional pages, write your name and case number (if the property of any additional pages, write your name and case number (if the property of any additional pages, write your name and case number (if the property of any additional pages, write your name and case number (if the property of any additional pages, write your name and case number (if the property of any additional pages, write your name and case number (if the property of any additional pages, write your name and case number (if the property of any additional pages, write your name and case number (if the property of any additional pages, write your name and case number (if the property of any according to the court with your other of any additional pages, write your name and case number (if the property of any according to the court with your other of any according to the court with your according to the court with your according to the court with your according to t	pule D: Creditors Who Have Claims Secured by Proper splete and accurate as possible. If two married people are filing together, both formation. If more space is needed, copy the Additional Page, fill it out, number of any additional pages, write your name and case number (if known). The property of the claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You fees. Fill in all of the information below. List All Secured Claims Ill secured claims. If a creditor has more than one secured con has a particular claim, list the other creditors in Part 2. As as possible, list the claims in alphabetical order according to the or's name. Describe the property that secures the claim: Describe the property that secures the claim: Describe the property that secures the claim: The contingent continue con	pulse D: Creditors Who Have Claims Secured by Property Inplete and accurate as possible. If two married people are filing together, both are equal formation. If more space is needed, copy the Additional Page, fill it out, number the entre of any additional pages, write your name and case number (if known). In greations secured by your property? No. Check this box and submit this form to the court with your other schedules. You have not does. Fill in all of the information below. List All Secured Claims Ill secured claims. If a creditor has more than one secured list the creditor separately for each claim. If more than one or has a particular claim, list the other creditors in Part 2. As as possible, list the claims in alphabetical order according to the or's name. Describe the property that secures the claim: Describe the property that secures the claim: As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)	pule D: Creditors Who Have Claims Secured by Property pupelete and accurate as possible. If two married people are filling together, both are equally responsible for sup formation. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to the of any additional pages, write your name and case number (if known). Pupelete and accurate as possible. If two married people are filling together, both are equally responsible for supportations. If or favorable in the property it of any additional pages, write your name and case number (if known). Pupelete and accurate as possible. If two married people are filling together, both are equally responsible for supportation. If work and case number (if known). Pupelete and accurate as possible, it out, number the entries, and attach it to the of any additional page, fill it out, number the entries, and attach it to the other of any and attach it to the other in the other

Official Form 106D

Fill in this inf	formation to i	dentify your ca	ase:			
Debtor 1	ASHLEY	MARIE	SORIANO	_		
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	-		
United States Ba	inkruptcy Court fo	r the: DISTRICT	OF NEVADA			
Case number	aptoy countre	o. <u>- 10 11 11 0 1</u>	<u> </u>	_		
(if known)					Check if this is a amended filing	an
Official Form	106E/F					
Schedule E	/F: Creditor	s Who Have	Unsecured Claims			12/15
Do not include an If more space is r to this page. On	ny creditors with needed, copy the the top of any ad	partially secured Part you need, fil ditional pages, w	and on Schedule G: Executory C claims that are listed in Schedu I it out, number the entries in the rite your name and case number ecured Claims	le D: Creditors Who He boxes on the left. A	old Claims Secur	ed by Property.
1. Do any credi	tors have priorit	y unsecured clain	ns against you?			
□ No. Go ✓ Yes.	to Part 2.					
claim. For ea show both pri more space is	ach claim listed, ic ority and nonprior	entify what type of ity amounts. As m ity unsecured clain	creditor has more than one priority claim it is. If a claim has both priouch as possible, list the claims in his, fill out the Continuation Page of	ority and nonpriority ame alphabetical order acco	ounts, list that clai	m here and or's name. If
(For an expla	nation of each typ	e of claim, see the	instructions for this form in the in	struction booklet. Total claim	Priority amount	Nonpriority amount
2.1				\$100.00	\$100.00	\$0.00
IRS Priority Creditor's Nan	10		Last 4 digits of account numbe	r		
PO Box 7346			When was the debt incurred?		_	
Number Street			As of the date you file, the clair	n is: Check all that app	lly.	
			Contingent Unliquidated			
Philadelphia City	PA State	19101 ZIP Code	Disputed			
Who incurred the ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and I ☑ At least one of	Debtor 2 only f the debtors and claim is for a cor	another	Type of PRIORITY unsecured of Domestic support obligations ✓ Taxes and certain other debt ☐ Claims for death or personal intoxicated ☐ Other. Specify	s s you owe the governm	ent	
✓ No Yes						

Debtor 1 A	SHLEY MARIE SORIANO	Case number (if known)	
Part 2:	List All of Your NONPRIORIT	TY Unsecured Claims	
No. Yes 4. List all of If a credit type of cla Part 3. If I Advance Am Nonpriority Credit 2855 N. McC. Number Stree Sparks City Who incurred	vour nonpriority unsecured claims or has more than one nonpriority unseam it is. Do not list claims already incomore space is needed for nonpriority verica or's Name arran Blvd, Ste 104 eet NV 89431 State ZIP Code the debt? Check one.	t. Submit this form to the court with your other schedules. s in the alphabetical order of the creditor who holds each claim. Ecured claim, list the creditor separately for each claim. For each claim listed, ideluded in Part 1. If more than one creditor holds a particular claim, list the other unsecured claims, fill out the Continuation Page of Part 2. Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce	
At least on Check if the	nly nd Debtor 2 only e of the debtors and another nis claim is for a community debt ubject to offset?	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Purchase Money	\$710.00
At least on Check if the	DE 19850 State ZIP Code the debt? Check one.	Last 4 digits of account number 6 8 7 3 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collecting for -	Ψ710.00

After listing any entries on this page, number them sequentially from the previous page. After listing any entries on this page, number them sequentially from the previous page. After listing any entries on this page, number them sequentially from the previous page. Sapta 14:3 Capital Cine Capital	Debtor 1 ASHLEY MARIE SORIANO	Case number (if known)	
Acapital One	Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
Last 4 digits of account number Memory Contingent Memory Con		em sequentially from the	Total claim
Capital One Last 4 digits of account number Number Sinear	4.3		\$1.350.00
Nonprincery Creater's Name POP Box 30281 Number Street S	Capital One	Last 4 digits of account number	
As of the date you file, the claim is: Check all that apply. Contingent Uniquidated Disputed	Nonpriority Creditor's Name		
Sait Lake City UT 84130 City Who incurred the debt? Check one. State ZiP Code Check ore. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Credit Card Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Credit Card Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Credit Card Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Credit Card Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Credit Card Debtor 1 and Debtor 2 only State ZiP Code Who Incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only New Street State Subject to offset? Debtor 1 only Debtor 2 only Debtor 1 and D		As of the date you file, the claim is: Check all that apply.	
Disputed		<u> </u>	
Salt Lake City UT 84130 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 and Debtor 2 only Credit Card New Yes			
Who incurred the debt? Check one. Debtor 1 and Debtor 2 only	Salt Lake City UT 84130	Disputed	
Student loans Student to answer Student to answer Student loans Stud	-	Type of NONPRIORITY unsecured claim:	
County of the debtor 2 only	- Dubling A and		
Debtor 1 and Debtor 2 only			
At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No Yes At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? Check if this claim is for a community debt is the claim subject to offset? Check if this claim is for a community debt is the claim subject to offset? Check if this claim is for a community debt is the claim subject to offset? Check if this claim is for a community debt is the claim subject to offset? Check if this claim is for a community debt is the claim subject to offset? Check if this claim is for a community debt is the claim subject to offset? Check if this claim is for a community debt is the claim subject to offset? Check if this claim is for a community debt is the claim subject to offset? Check if this claim is for a community debt is the claim subject to offset? Check if this claim is for a community debt is the claim subject to offset? Check if this claim is for a community debt is the claim subject to offset? At least one of the debtors and another Check one. Check one. Check one. Contingent Continge	—		
Is the claim subject to offset? No Yes 4.4	At least one of the debtors and another		
A.4 S646.00	Check if this claim is for a community debt	Credit Card	
Yes			
4.4 Last 4 digits of account number State Last 4 digits of account number Street When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	발 ,,		
Last 4 digits of account number Survet Sur			
Number Street Street Street State ZiP Code State ZiP Code Check one. State Street Street Street State ZiP Code Check one. State ZiP Code Check if this claim is for a community debt State ZiP Code Check if this claim is for a community debt State ZiP Code Check if this claim is for a community debt State ZiP Code Check one. Street Street Street Street Street Street State ZiP Code Check one. State Z	4.4		\$646.00
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Reno NV 89502 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Street Street CASHCO		When was the debt incurred?	
Reno NV 89502 City State ZIP Code Disputed Dispu	Number Street	<u> </u>	
Disputed			
Type of NONPRIORITY unsecured claim: State ZIP Code Check one. Student loans Student loans Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Debtor 4 and Debtor 5 only Debtor 4 and Debtor 5 only Debtor 6 only Debtor 1 only Debtor 1 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collecting for -			
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At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collecting for - Other. Specify Ot	H Balance A and Balance and		
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City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another ✓ Other. Specify Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify	RENO NV 89503	— ☐ Disputed	
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement of divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	- Balance and	☐ Student loans	
Debtor 1 and Debtor 2 only At least one of the debtors and another Debtor 1 and Debtor 2 only Other. Specify			
At least one of the debtors and another Other. Specify	Debtor 1 and Debtor 2 only		
	At least one of the debtors and another	트 블 등 기 등 기 기 기 기 기 기 기 기 기 기 기 기 기 기 기 기	
Check if this claim is for a community debt Purchase Money	☐ Check if this claim is for a community debt		
Is the claim subject to offset?			
☑ No	✓ No ✓ Yes		

Debtor 1	ASHLEY MARIE SORIANO	Case number (if known)	
Part 2:	Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listin	g any entries on this page, number the age.	m sequentially from the	Total claim
4.6			\$247.00
	reditor's Name	Last 4 digits of account number	
PO Box 1 Number	82125 Street	As of the date you file, the claim is: Check all that apply.	
		_ Contingent	
		☐ Unliquidated ☐ Disputed	
Columbu City	State ZIP Code	Type of NONDRIORITY unccoursed claim:	
•	red the debt? Check one.	Type of NONPRIORITY unsecured claim: ☐ Student loans	
☑ Debtor	•	Obligations arising out of a separation agreement or divorce	
☐ Debtor	2 only 1 and Debtor 2 only	that you did not report as priority claims	
	t one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check	if this claim is for a community debt	✓ Other. Specify Credit Card	
	n subject to offset?		
✓ No ☐ Yes			
_	A'S SECRET		
	to occur.		
4.7			\$383.00
Nonpriority C	VE reditor's Name	Last 4 digits of account number	
200 CRO	SSKEYS OFFICE PARK	When was the debt incurred?	
Number	Street	As of the date you file, the claim is: Check all that apply.	
		☐ Contingent ☐ Unliquidated ☐ Uniquidated ☐ Contingent	
FAIRPOR	T NY 14450	Disputed	
City	State ZIP Code	Type of NONPRIORITY unsecured claim:	
	red the debt? Check one.	Student loans	
☑ Debtor	•	Obligations arising out of a separation agreement or divorce	
☐ Debtor	1 and Debtor 2 only	that you did not report as priority claims	
	t one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
ш	if this claim is for a community debt		
_	n subject to offset?	Solicoting for	
☑ No	•		
☐ Yes			

Debtor 1 ASHLEY MARIE SORIANO	Case number (if known)	
Part 2: Your NONPRIORITY Unsec	ured Claims Continuation Page	
After listing any entries on this page, number the previous page.	nem sequentially from the	Total claim
4.8		\$1,062.00
Credit One Bank	Last 4 digits of account number	
Nonpriority Creditor's Name PO Box 98872	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	Unliquidated	
Las Vegas NV 89193	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Credit Card	
Is the claim subject to offset?	Credit Card	
✓ No		
Yes		
4.9		\$580.00
EOS CCA	Last 4 digits of account number	
Nonpriority Creditor's Name 700 LONGWATER DR	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	Unliquidated	
NORWELL MA 02061	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?	Collecting for -	
No		
Yes		
VERSION WIRELESS		

Debtor 1 ASHLEY MARIE SORIANO	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	ured Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.10		\$0.00
Family Finance Nonpriority Creditor's Name C/O Royal Management Number Street 25331 IH 10 West Ste 101	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated	
San Antonio TX 78257 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes \$280	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify UNSECURED DEBT	
First Premier Bank Nonpriority Creditor's Name 3820 N LOUISE AVE Number Street	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	\$1,641.00
SIOUX FALLS City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Yes	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	

Debtor 1 ASHLEY MARIE SORIANO	Case number (if known)	
Part 2: Your NONPRIORITY Unsec	ured Claims Continuation Page	
After listing any entries on this page, number the previous page.	nem sequentially from the	Total claim
4.12		\$125.00
GLOBAL PAYMENTS CHECK SE	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
PO BOX 661158 Number Street	As of the date you file, the claim is: Check all that apply.	
Number Street	Contingent	
	Unliquidated	
CHICAGO IL 60666	── Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?		
☑ No		
Yes		
4.13		¢445.00
	Look & divite of account number	\$445.00
Lab Corp Nonpriority Creditor's Name	Last 4 digits of account number	
604 W. Washington St.	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated	
	— Disputed	
City NV 89703 State ZIP Code	Time of NONDRIGHTY	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	Other. Specify	
<u>'</u>	Medical	
Is the claim subject to offset? No		
☐ Yes		
4.14		\$588.00
Mavrick Finance	Last 4 digits of account number	φ366.00
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 3146 Number Street	As of the date you file, the claim is: Check all that apply.	
Number Street	Contingent	
	Unliquidated	
Spartanburg SC 29304	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Credit Card	
Is the claim subject to offset?	Cicuit Caiu	
No		
☐ Yes		

Debtor 1	ASHLEY MARIE SORIANO	Case number (if known)	
Part 2:	Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listin	g any entries on this page, number the age.	m sequentially from the	Total claim
4.15			\$660.00
	oan Center	Last 4 digits of account number	
	reditor's Name Iumb Lane SUITE A	When was the debt incurred?	
Number	Street	As of the date you file, the claim is: Check all that apply.	
		_ ☐ Contingent ☐ Unliquidated	
		— ☐ Disputed	
Reno City	NV 89502 State ZIP Code	— Tarres of MONDRIORITY are a count of all all are	
•	red the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
✓ Debtor	1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor	•	that you did not report as priority claims	
□	1 and Debtor 2 only	☐ Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another		Other. Specify	
_	if this claim is for a community debt	Payday Loan	
✓ No	n subject to offset?		
Yes			
4.16			\$1,077.00
Money Tr	ree	Last 4 digits of account number	
	EAR ACRE LANE	When was the debt incurred?	
Number	Street	As of the date you file, the claim is: Check all that apply.	
		_ ☐ Contingent ☐ Unliquidated	
		— ☐ Disputed	
RENO City	NV 89512 State ZIP Code		
-	red the debt? Check one.	Type of NONPRIORITY unsecured claim:	
☑ Debtor		Student loans Obligations origing out of a congretion agreement or diverse	
Debtor	2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
ш	t one of the debtors and another	☑ Other. Specify	
☐ Check	if this claim is for a community debt	Collecting for -	
— N.	n subject to offset?		
☑ No			
☐ Yes			

Debtor 1 ASHLEY MARIE SORIANO	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	ıred Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.17		\$676.00
National Business Factor	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	☐ Unliquidated ☐ Disputed	
Carson City NV 89705		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Collecting for -	
s the claim subject to offset?	•	
No No		
Yes		
NORTHERN NEVADA EMERGENCY		
4.18		\$475.00
NEVADA TITLE LOANS	Last 4 digits of account number	<u>.</u>
Nonpriority Creditor's Name	When was the debt incurred?	
961 S. VIRGINIA STREET Number Street	As of the date you file, the claim is: Check all that apply.	
Variable Citoti	Contingent	
	Unliquidated	
RENO NV 89502	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	TITLE LOAN	
s the claim subject to offset?		
▼ No		

Debtor 1	ASHLEY MARIE SORIANO	Case number (if known)	
Part 2:	Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listin	g any entries on this page, number the age.	m sequentially from the	Total claim
4.19			\$367.00
	ada Credit Union	Last 4 digits of account number	
	reditor's Name lojave Road	When was the debt incurred?	
Number	Street	As of the date you file, the claim is: Check all that apply.	
		Contingent Unliquidated	
Las Vega	s NV 89121	Disputed	
City	State ZIP Code	Type of NONPRIORITY unsecured claim:	
— B.1	red the debt? Check one.	Student loans	
✓ Debtor Debtor		Obligations arising out of a separation agreement or divorce	
_	1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
_	t one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt		Collecting for -	
No No	n subject to offset?		
Yes			
4.20			\$1,350.00
Pitts Orth	andontics	Last 4 digits of account number	\$1,330.00
Nonpriority C	reditor's Name	When was the debt incurred?	
Number	ghlin Pkwy #305 Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
		☐ Unliquidated ☐ ☐ Disputed	
Reno City	NV 89519 State ZIP Code		
,	red the debt? Check one.	Type of NONPRIORITY unsecured claim: ☐ Student loans	
☑ Debtor		☐ Obligations arising out of a separation agreement or divorce	
Debtor	2 only 1 and Debtor 2 only	that you did not report as priority claims	
_	t one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check	if this claim is for a community debt	Medical	
Is the clair	n subject to offset?		
✓ No			
Yes			

Debtor 1	ASHLEY MARIE SORIANO	Case number (if known)	
Part 2:	Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listin	ng any entries on this page, number the page.	em sequentially from the	Total claim
4.21			\$844.00
	SIONAL FIN. CORP. Creditor's Name	Last 4 digits of account number	
918 10TH		When was the debt incurred?	
Number	Street	As of the date you file, the claim is: Check all that apply.	
		☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
CDEELE	V CO 90634	Disputed	
GREELE'	Y	Type of NONPRIORITY unsecured claim:	
- 5.1	rred the debt? Check one.	Student loans	
<u> </u>	r 1 only r 2 only	Obligations arising out of a separation agreement or divorce	
Debtor	r 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
ш	st one of the debtors and another	☑ Other. Specify	
_	if this claim is for a community debt	Collecting for - RENOWN	
Is the clair	m subject to offset?		
Yes			
RENOWN	N		
4.22			\$2,000.00
	SSIVE LEASING LLC	Last 4 digits of account number	
	Creditor's Name ATA DRIVE	When was the debt incurred?	
Number	Street	As of the date you file, the claim is: Check all that apply.	
		□ Contingent □ Unliquidated	
		Disputed	
DRAPER City	State ZIP Code	Type of NONPRIORITY unsecured claim:	
	rred the debt? Check one.	Student loans	
□ ¬	r 1 only r 2 only	Obligations arising out of a separation agreement or divorce	
	r 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At leas	st one of the debtors and another	Other. Specify	
Check Check	cif this claim is for a community debt	Collecting for -	
	m subject to offset?		
✓ No ☐ Yes			

Debtor 1 ASHLEY MARIE SORIANO	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.23		\$2,590.00
Renown Regional Medical Center	Last 4 digits of account number 3 4 7 2	
Nonpriority Creditor's Name	When was the debt incurred?	
1155 Mill Street		
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
-	☐ Unliquidated ☐ Disputed	
Reno NV 89502	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	✓ Other. Specify	
☐ Check if this claim is for a community debt	Medical	
Is the claim subject to offset?		
☑ No		
Yes		
4.24		\$2,011.60
Sierra Air, Inc.	Last 4 digits of account number 6 1 6 4	
Nonpriority Creditor's Name	When was the debt incurred?	
4875 Longley Ln. Number Street	As of the date you file, the claim is: Check all that apply.	
Number Street	Contingent	
	Unliquidated	
	- ☐ Disputed	
Reno NV 89502		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	☐ Student loans	
	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	✓ Other. Specify Collecting for -	
	Collecting for -	
Is the claim subject to offset? ✓ No		
☑ No □ Yes		
4.25		\$658.00
Sun Leone	Last 4 digits of account number	Ψ030.00
Sun Loans Nonpriority Creditor's Name	_ Last 4 digits of account number	
4932 S. Virginia Street	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Reno NV 89502	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Payday Loan	
Is the claim subject to offset?		
☑ No		
☐ Yes		

Debtor 1 ASHLEY MARIE SORIANO	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.26		\$755.00
TBOM-GENESIS RETAIL	Last 4 digits of account number	4700.00
Nonpriority Creditor's Name	When was the debt incurred?	
PO BOX 8099 Number Street	As of the date you file, the claim is: Check all that apply.	
Number Street	Contingent	
	Unliquidated	
NEWARK DE 40744	Disputed	
NEWARK DE 19714 City State ZIP Code	Type of NONDRIORITY unaccured eleims	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No ☐ Yes		
4.27		\$2,396.00
The Villas at Keystone Canyon	Last 4 digits of account number	
Nonpriority Creditor's Name 3030 Leadership Parkway	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	Unliquidated	
Reno NV 89503	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?	Collecting for -	
✓ No		
Yes		
4.28		\$511.00
US AUTO TITLE	Last 4 digits of account number	
Nonpriority Creditor's Name 4101 S. VIRGINA STREET	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	☐ Unliquidated ☐ Disputed	
RENO NV 89502	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	✓ Other. Specify TITLE LOAN	
Is the claim subject to offset?	··· == ==	
No No		
Yes		

Debtor 1	ASHLEY MARIE SORIANO	Case number (if known)	
Part 2:	Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listin	ng any entries on this page, number the page.	em sequentially from the	Total claim
4.29			\$426.00
US BANK		Last 4 digits of account number6164_	
PO BOX	Creditor's Name 108	When was the debt incurred?	
Number	Street	 As of the date you file, the claim is: Check all that apply. ☐ Contingent 	
		Unliquidated	
SAINT LO	OUIS MO 63166	Disputed	
City	State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incur Debtor	red the debt? Check one.	Student loans	
<u> </u>	· 2 only	Obligations arising out of a separation agreement or divorce	
_	1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At leas	st one of the debtors and another	Other. Specify	
☐ Check	if this claim is for a community debt	Collecting for -	
Is the clair	m subject to offset?		
✓ No ☐ Yes			
4.30			\$764.00
Wells Far	go	Last 4 digits of account number 4 7 2 7	
Nonpriority C	Creditor's Name	When was the debt incurred?	
Number	Street	As of the date you file, the claim is: Check all that apply.	
		_ Contingent	
		Unliquidated	
Albuquer	que NM 87199	─ ☐ Disputed	
City	State ZIP Code	Type of NONPRIORITY unsecured claim:	
— Date:	red the debt? Check one. 1 only	☐ Student loans	
<u> </u>	2 only	Obligations arising out of a separation agreement or divorce	
ш	1 and Debtor 2 only	that you did not report as priority claims	
At leas	st one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check	if this claim is for a community debt	Collecting for -	
	m subject to offset?		
☑ No			
☐ Yes			

Debtor 1 ASHLEY MARIE SORIANO		RIANO	Case number (if known)
Part 3: List Others to Be Notified Ab			oout a Debt That You Already Listed
For ex credit debts	ample, if a collection agor in Parts 1 or 2, then I	gency is trying t ist the collectio 1 or 2, list the a	notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. to collect from you for a debt you owe to someone else, list the original on agency here. Similarly, if you have more than one creditor for any of the additional creditors here. If you do not have additional parties to be notified for abmit this page.
JUAN SO	RIANO		On which entry in Part 1 or Part 2 did you list the original creditor?
Name 1205 WIS	TI FR CT.		Line of (Check one):
Number	Street		Part 2: Creditors with Nonpriority Unsecured Claims
RENO City	NV State	89506 ZIP Code	Last 4 digits of account number

Debtor 1	ASHLEY MARIE SORIANO	Case number (if known)
Part 4:	Add the Amounts for Each Type of Unsecured Claim	

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.	\$0.00
	6b.	Taxes and certain other debts you owe the government	6b.	\$100.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. -	\$0.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$100.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. ⊣	\$27,237.60
	6j.	Total. Add lines 6f through 6i.	6j.	\$27,237.60

Fill in this information to identify your case:						
Debtor 1	ASHLEY First Name	MARIE Middle Name	SORIANO Last Name			
Debtor 2 (Spouse, if filing		Middle Name	Last Name			
United States Bankruptcy Court for the: DISTRICT OF NEVADA						
Case number (if known)						

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

F	ill in this i	nformation to i	dentify your case				
D	ebtor 1	ASHLEY	MARIE	SO	RIANO		
		First Name	Middle Name	Last	Name		
	ebtor 2 Spouse, if filin	g) First Name	Middle Name	Last	Name		
Uı	nited States E	Bankruptcy Court fo	r the: DISTRICT OF	NEVAD	A		
	ase number						
	known)						Check if this is an amended filing
Of	ficial For	m 106H					
		H: Your Cod	ebtors				12/15
nee pag	o married peo eded, copy th ge. On the to	ople are filing toge ne Additional Page pp of any Additiona	ther, both are equally , fill it out, and numbe al Pages, write your n	respons er the ent ame and	sible for supplyir tries in the boxes case number (if	ng corre s on the f known	s complete and accurate as possible. If ect information. If more space is e left. Attach the Additional Page to this n). Answer every question.
1.	Do you hav ☐ No ☑ Yes	e any codebtors?	(If you are filing a jo	int case,	do not list either s	spouse	as a codebtor.)
	No. Go Yes. C N Yes. In N In 11	o to line 3. Did your spouse, for o es which community wan Soriano	rmer spouse, or legal e	quivalent ı live?		he time'	in the name and current address of that person.
	– R	eno	N	V	89506		-
	Ci			ate	ZIP Code		
3.	person sho creditor on	own in line 2 again Schedule D (Office	as a codebtor only if	that pers	son is a guaranto (Official Form 1	or or co	if your spouse is filing with you. List the osigner. Make sure you have listed the or Schedule G (Official Form 106G). Use
	Column	1: Your codebtor					column 2: The creditor to whom you owe the debt
	_					С	heck all schedules that apply:
3.1	Spouse Name	Name Not Ente	red			- г	Schedule D, line
	Number	Street				- <u>v</u>	Schedule E/F, line 4.8
						- [<u> </u>
	Cir.		Ctata	710 /	Codo	_ C	redit One Bank
	City		State	ZIP (Code		

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Debto	r 1 ASHLEY MARIE SORIANO			Case number (if known)
	Additional Page to List	More Code	ebtors	
	Column 1: Your codebtor			Column 2: The creditor to whom you owe the debt
				Check all schedules that apply:
3.2	Spouse Name Not Entered			Schedule D, line
	Name			
	Number Street			_
	-			Schedule G, line EOS CCA
	City	State	ZIP Code	
3.3	Spouse Name Not Entered			— October 1 to D. Pere
	Name			Schedule D, line
	Number Street			Schedule E/F, line 4.10
				Schedule G, line
	City	State	ZIP Code	Family Finance
24	Spouse Name Not Entered			
3.4	Name Not Entered			Schedule D, line
	Number Street			Schedule E/F, line 4.12
				Schedule G, line
	City	Ctata	7ID Code	GLOBAL PAYMENTS CHECK SE
	City	State	ZIP Code	
3.5	Spouse Name Not Entered Name			Schedule D, line
	Number Street			Schedule E/F, line 2.1
				Schedule G, line
				IRS
	City	State	ZIP Code	
3.6	Spouse Name Not Entered Name			Schedule D, line
				Schedule E/F, line 4.22
	Number Street			Schedule G, line
				PROGRESSIVE LEASING LLC
	City	State	ZIP Code	
3.7	Spouse Name Not Entered			Schedule D, line
	J Name			<u></u>
	Number Street			<u> </u>
				Schedule G, line Sierra Air, Inc.
	City	State	ZIP Code	

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Debtor 1	ASHLEY MARIE SORIANO	Case number (if known)
	Additional Page to List More Codebtors	
Co	olumn 1: Your codebtor	Column 2: The creditor to whom you owe the debt
		Check all schedules that apply:
1 J.J.	pouse Name Not Entered	Schedule D, line
Nu	imber Street	Schedule E/F, line <u>4.26</u> Schedule G, line
Cit	y State ZIP Code	TBOM-GENESIS RETAIL
	pouse Name Not Entered	Schedule D, line
Nu	mber Street	Schedule E/F, line 4.27
_		Schedule G, line The Villas at Keystone Canyon
Cit	y State ZIP Code	

Fill in this information to identify your case:						
Debtor 1	ASHLEY First Name	MARIE Middle Name	SORIANO Last Name		Che	ck if this is:
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			An amended filing
United States Bank	ruptcy Court for the:	DISTRICT OF N	EVADA			A supplement showing postpetition chapter 13 income as of the following date:
Case number (if known)	-					MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

1.	Fill in your employment information.		Debtor 1		Debtor 2 or non-filing spouse		
	If you have more than one job, attach a separate page with information about	Employment status	✓ Employed☐ Not employedFAMILY SERVICE SPECIALIST		☐ Employed✓ Not employed	ed	
	additional employers.	Occupation					
	Include part-time, seasonal, or self-employed work.	Employer's name	STATE OF NEW DEPTARTMEN	ADA WELFARE T			
	Occupation may include student or homemaker, if it applies.	Employer's address	4055 SOUTH VIRGINIA STREET Number Street		Number Street		
			RENO City	NV 89502 State Zip Code	City	State Zip Code	
		How long employed the	•				

Part 2: **Give Details About Monthly Income**

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse \$0.00 \$3,264.00 List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. \$0.00 \$0.00 Calculate gross income. Add line 2 + line 3. \$3,264.00 \$0.00

Debt	otor 1 ASHLEY MARIE SORIANO		Case nu	mber (if kno	wn)			
		F	or Debtor 1	For Deb	tor 2 or g spouse			
	Copy line 4 here	→ 4.	\$3,264.00		\$0.00	_		
5.	List all payroll deductions:							
	5a. Tax, Medicare, and Social Security deductions	5a.	\$722.00		\$0.00			
	5b. Mandatory contributions for retirement plans	5b.	\$0.00		\$0.00			
	5c. Voluntary contributions for retirement plans	5c.	\$0.00		\$0.00			
	5d. Required repayments of retirement fund loans	5d.	\$0.00		\$0.00			
	5e. Insurance	5e.	\$180.00		\$0.00			
	5f. Domestic support obligations	5f.	\$0.00		\$0.00			
	5g. Union dues	5g.	\$0.00		\$0.00			
	5h. Other deductions. Specify: AFLAC	5h. +	\$94.00		\$0.00			
6.	Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$.	+ 6.	\$996.00		\$0.00			
7.	Calculate total monthly take-home pay. Subtract line 6 from line	4. 7.	\$2,268.00		\$0.00			
8.	List all other income regularly received:							
	8a. Net income from rental property and from operating a business, profession, or farm	8a.	\$0.00		\$0.00			
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.							
	8b. Interest and dividends	8b.	\$0.00		\$0.00			
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00		\$0.00			
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.							
	8d. Unemployment compensation	8d.	\$0.00		\$0.00			
	8e. Social Security	8e.	\$0.00		\$0.00			
	8f. Other government assistance that you regularly receive	•						
	Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.							
	Specify:	8f.	\$0.00		\$0.00			
	8g. Pension or retirement income	8g.	\$0.00		\$0.00			
	8h. Other monthly income.	og.	Ψ0.00		Ψ0.00			
	Specify:	8h. +	\$0.00		\$0.00			
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8f	h. 9.	\$0.00		\$0.00			
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10.	\$2,268.00	+	\$0.00	=	\$2,268.00	
11	State all other regular contributions to the expenses that you list in		.1			Ī		
•••	Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.							
	Do not include any amounts already included in lines 2-10 or amounts	that are not	available to pay	expenses lis	sted in Scl	nedu	ıle J.	
	Specify:				_ 11.	+ _	\$0.00	
12.	Add the amount in the last column of line 10 to the amount in line 1 income. Write that amount on the Summary of Your Assets and Liabilit				12.		\$2,268.00	
	if it applies.						Combined nonthly income	
13.	Do you expect an increase or decrease within the year after you fill	e this form	?					
	✓ No. None.							
	Yes. Explain:							

Fill in this	information to iden	tify your case:		Ch	and if this in				
Debtor 1	ASHLEY	MARIE	SORIANO	, I <u></u>	Check if this is: An amended filing				
Debior	First Name	Middle Name	Last Name	<u></u> 📙	A supplement showing chapter 13 expenses				
Debtor 2 (Spouse, if	filing) First Name	Middle Name	Last Name		following date:	as of the			
United Stat	tes Bankruptcy Court for th	e: DISTRICT OF N	IEVADA		MM / DD / YYYY				
Case numb				_	WIWI7 DD / TTTT				
(if known)									
Official Fo									
Schedule	J: Your Expens	es				12/15			
correct inforn	te and accurate as possination. If more space is a seenumber (if known). Ar Describe Your Hous	needed, attach anoth swer every question	er sheet to this						
	joint case?	CHOIG							
☑ No.	Go to line 2. Does Debtor 2 live in a No Yes. Debtor 2 must			Separate Household o	of Debtor 2.				
-	ave dependents?	Yes. Fill out this in	IOIIIIalioii Da	ependent's relationshebtor 1 or Debtor 2	ip to Dependent's age	Does dependent live with you?			
Debtor 2.		ndents'		ON	 1	No			
Do not sta	ate the dependents'					─ ☑ Yes □ No ─ □ Yes			
						☐ No			
			_			Yes			
			_			─			
						□ No			
•	expenses include s of people other than	☑ No □ Yes	_			— □ Yes			
yourself	and your dependents?								
Part 2:	Estimate Your Onge	ning Monthly Exp	enses						
Estimate your	r expenses as of your ba enses as of a date after the fill in the applicable date.	nkruptcy filing date une bankruptcy is filed	nless you are u	•	• •				
•	nses paid for with non-ca	•	•		Your expen	ises			
	al or home ownership ex rst mortgage payments an				4.	\$1,495.00			
If not inc	luded in line 4:								
4a. Real	l estate taxes				4a				
4b. Prop	perty, homeowner's, or rent	er's insurance			4b				
4c. Hom	ne maintenance, repair, an	d upkeep expenses			4c				
4d Hom	neowner's association or co	ondominium dues			4d.				

Deb	otor 1 ASHLEY MARIE SORIANO	Case number (if known)	
		Your expe	nses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a	\$120.00
	6b. Water, sewer, garbage collection	6b	
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c	\$267.00
	6d. Other. Specify:	6d.	
7.	Food and housekeeping supplies	7.	\$400.00
8.	Childcare and children's education costs	8.	
9.	Clothing, laundry, and dry cleaning	9.	\$60.00
10.	Personal care products and services	10.	\$200.00
11.	Medical and dental expenses	11.	\$100.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$300.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	
14.	Charitable contributions and religious donations	14.	
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	
	15b. Health insurance	 15b.	
	15c. Vehicle insurance	 15c.	\$220.00
	15d. Other insurance. Specify:	 15d.	<u> </u>
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a	
	17b. Car payments for Vehicle 2	17b	
	17c. Other. Specify:	17c	
	17d. Other. Specify:	17d	
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	
19.	Other payments you make to support others who do not live with you. Specify:	19.	

Debtor 1		ASHLEY MARIE SORIANO	Case number (if known)				
20.		r real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.					
	20a. Mortgages on other property		20a				
	20b.	Real estate taxes	20b				
	20c.	Property, homeowner's, or renter's insurance	20c				
	20d.	Maintenance, repair, and upkeep expenses	20d				
	20e.	Homeowner's association or condominium dues	20e	_			
21.	Other	r. Specify:	21. +	_			
22.	Calcu	ulate your monthly expenses.					
	22a.	Add lines 4 through 21.	22a	\$3,162.00			
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106.	J-2. 22b	_			
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c	\$3,162.00			
23.	Calcu	ulate your monthly net income.					
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a. <u> </u>	\$2,268.00			
	23b.	Copy your monthly expenses from line 22c above.	23b. _	\$3,162.00			
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c	(\$894.00)			
24.	Do yo	ou expect an increase or decrease in your expenses within the year after	you file this form?				
	For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?						
	V	No					
		Yes. Explain here: None.					

Fill in this information to identify your case:						
Debtor 1	ASHLEY First Name	MARIE Middle Name	SORIANO Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the: DISTRICT OF NEVADA						
Case number (if known)						

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: **Summarize Your Assets** Your assets Value of what you own Schedule A/B: Property (Official Form 106A/B) \$0.00 1a. Copy line 55, Total real estate, from Schedule A/B..... 1b. Copy line 62, Total personal property, from Schedule A/B..... \$15,610.00 1c. Copy line 63, Total of all property on Schedule A/B..... Part 2: **Summarize Your Liabilities** Your liabilities Amount you owe Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) \$0.00 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D.... _ Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) \$100.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... \$27,237.60 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F......+_ \$27.337.60 Your total liabilities Part 3: **Summarize Your Income and Expenses** Schedule I: Your Income (Official Form 106I) \$2,268.00 Copy your combined monthly income from line 12 of Schedule I..... Schedule J: Your Expenses (Official Form 106J) \$3,162.00 Copy your monthly expenses from line 22c of Schedule J.....

Del	otor 1	ASHLEY MARIE SORIANO	Case number (if known)				
Р	art 4:	Answer These Questions for Administrative and Statistic	cal Records				
6.	Are you	ou filing for bankruptcy under Chapters 7, 11, or 13?					
	 No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. ✓ Yes 						
7.	What k	kind of debt do you have?					
	<u> </u>	our debts are primarily consumer debts. Consumer debts are those "incuramily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statis					
		our debts are not primarily consumer debts. You have nothing to report or nis form to the court with your other schedules.	n this part of the form. Check this box and subm	nit			
8.		the Statement of Your Current Monthly Income: Copy your total current monthly Income: Copy your total current monthly Income	onthly income from \$3	,264.00			
9.	Copy th	the following special categories of claims from Part 4, line 6 of Schedule	e E/F:				
			Total claim				
	Erom B	Part 4 on Schodulo E/E conv the following:					

From Part 4 on Schedule E/F, copy the following:	
9a. Domestic support obligations. (Copy line 6a.)	\$0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$100.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
9d. Student loans. (Copy line 6f.)	\$0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$0.00
9g. Total. Add lines 9a through 9f.	\$100.00

Debtor 1 ASHLEY MARIE SORIANO First Name Middle Name Last Name
Debtor 2 (Spouse, if filing) First Name Middle Name Last Name
United States Bankruptcy Court for the: DISTRICT OF NEVADA
Case number (if known)

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below		
Did you pay or agree to pay someone who is	NOT an attorney to help you fill out bankrupto	cy forms?
☑ No		
Yes. Name of person		ch Bankruptcy Petition Preparer's Notice, laration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have	read the summary and schedules filed with t	his declaration and that they are
true and correct.		
X /s/ ASHLEY MARIE SORIANO	_ X	
ASHLEY MARIE SORIANO, Debtor 1	Signature of Debtor 2	
Date MM / DD / YYYY	Date MM / DD / YYYY	

Debtor 1	ASHLEY First Name	MARIE Middle Nam	20	SORIANO Last Name				
D. I	riisi name	wilddie ivan	ie	Last Name				
Debtor 2 (Spouse, if filing)	First Name	Middle Nam	ne	Last Name				
United States Ba	nkruptev Court fo	r the: DISTRIC	T OF NE	VADA				
Case number	mapley Countro	- 1110. <u>21011110</u>						
(if known)					_	_	Check if this is an amended filing	
Official Form	107						, and the second	
tatement o	 f Financial	Affairs fo	r Indivi	iduals Fi	ling for Bankı	ruptcy		04/19
our name and ca	se number (if kr	nown). Answer			nere You Lived E	Before		
Part 1: Giv What is your Married Not marrie During the la	re Details About the current marital sed st 3 years, have	own). Answer Out Your Man status? you lived anyw	rital Stat	tus and Wh	you live now?			
. What is your Married Not marrie During the la No Yes. List	re Details About the current marital sed st 3 years, have	own). Answer Out Your Man status? you lived anyw	rital Stat	er than where	you live now? ude where you live n		. Dates i	Dehtor 2
Part 1: Giv What is your Married Not marrie During the la	re Details About the current marital sed st 3 years, have	own). Answer Out Your Man status? you lived anyw	rital Stat	er than where s. Do not incl	you live now?		Dates lived th	Debtor 2 nere
Part 1: Giv What is your Married Not marrie During the la No Yes. List	re Details About the current marital sed st 3 years, have	own). Answer Out Your Man status? you lived anyw	rital Stat where othe last 3 year Dates	er than where s. Do not incl	you live now? ude where you live n	ow.	lived th	nere
Part 1: Giv What is your Married Not married No Wing the la No Yes. List Debtor 1:	re Details About the Details A	out Your Manager status? you lived anywayou lived in the	rital Stat where othe last 3 year Dates	er than where s. Do not incl Debtor 1 here	you live now? ude where you live n Debtor 2:	ow.	lived th	nere
Part 1: Giv What is your Married Not married No Yes. List Debtor 1:	re Details About the current marital sed st 3 years, have	out Your Manager status? you lived anywayou lived in the	where other last 3 year Dates lived to	er than where s. Do not incl	you live now? ude where you live n Debtor 2:	ow.	lived th ☐ Sa	nere
Part 1: Giv What is your Married Not married No Yes. List Debtor 1:	se number (if kree Details About the Current marital standard stan	nown). Answer Out Your Man status? you lived anyw you lived in the	rital Stat	er than where s. Do not incl Debtor 1 here 2/2016	ude where you live n Debtor 2: Same as Deb	ow.	lived th	

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Debtor 1 ASHLEY MARIE SORIANO		ASHLEY MARIE SORIANO	Case number (if known)			
Р	art 2:	Explain the Sources of	Your Income			
4.	Fill in the	u have any income from employing total amount of income you receive filling a joint case and you have so Fill in the details.	eived from all jobs and all bu	ısinesses, including par	t-time activities.	lendar years?
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions
		ry 1 of the current year until ı filed for bankruptcy:	✓ Wages, commissions, bonuses, tips☐ Operating a business	\$19,590.00	☐ Wages, commissions, bonuses, tips ☐ Operating a business	
		calendar year: December 31, 2018)	✓ Wages, commissions, bonuses, tips☐ Operating a business	\$28,000.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	
		December 31, 2017)	✓ Wages, commissions, bonuses, tips☐ Operating a business	\$27,800.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	
5.	Include unempl	a receive any other income during income regardless of whether that oyment; and other public benefit publing and lottery winnings. If you 1.	t income is taxable. Examp ayments; pensions; rental ir	les of other income are ncome; interest; dividen	ds; money collected from la	wsuits; royalties;
	√ No	ch source and the gross income from the the gross income growth and the gross income growth and the gross income growth and the growth a	om each source separately.	Do not include income	that you listed in line 4.	

Del	otor 1	ASHLEY MARIE SOR	IANO	Case number (if	known)	
E	art 3:	List Certain Paym	ents You Made Before Yo	ou Filed for Bankruntcy		
6.			2's debts primarily consumer	· ·		
	□ No.	Neither Debtor 1 nor	• •	er debts. Consumer debts are de	efined in 11 U.S.C. § 101((8) as
		During the 90 days be	fore you filed for bankruptcy, did	you pay any creditor a total of \$6,8	325* or more?	
		□ No. Go to line 7. □				
		total amount	you paid that creditor. Do not inc	otal of \$6,825* or more in one or m clude payments for domestic support le payments to an attorney for this	ort obligations, such as	
		* Subject to adjustmer	nt on 4/01/22 and every 3 years a	fter that for cases filed on or after	the date of adjustment.	
	√ Yes	. Debtor 1 or Debtor 2	or both have primarily consum	er debts.		
	_	During the 90 days be	fore you filed for bankruptcy, did	you pay any creditor a total of \$60	0 or more?	
		No. Go to line 7.				
		creditor. Do		otal of \$600 or more and the total a ic support obligations, such as chi or this bankruptcy case.		
	corporate agent, ir such as	ions of which you are an	officer, director, person in contro ss you operate as a sole propriet y.	any general partners; partnerships I, or owner of 20% or more of their or. 11 U.S.C. § 101. Include payn	voting securities; and an	y managing
8.	Within 1	year before you filed fo		ny payments or transfer any prop	perty on account of a de	bt that
		ed an insider? pavments on debts quara	anteed or cosigned by an insider.			
	√ No	. List all payments that b	• •			
Ē	art 4:	Identify I east Act	ions, Repossessions, and	1 Foreclosures		
9.	Within 1 List all s	year before you filed fo	or bankruptcy, were you a part ersonal injury cases, small claims	y in any lawsuit, court action, or actions, divorces, collection suits		
	□ No ✓ Yes	. Fill in the details.				
	se title		Nature of the case	Court or agency		us of the case
	erra Air II riano	nc. V. Ashley	Collections	Reno Justice Cou Court Name	rt	Pending
-	-			Sierra St. Number Street		On appeal
Cas	se numbe	RSC2018-000992	_	- Street		_ ✓ Concluded
				Reno	NV	_
				City	State ZIP Code	=

Deb	tor 1	ASHLEY MARIE SORIANO	Case number (if k	nown)	
10.	seized,	I year before you filed for bankrup or levied? Ill that apply and fill in the details belo	tcy, was any of your property repossessed, foreclose	d, garnished, attac	hed,
	-	Go to line 11. Fill in the information below.			
11.		-	ptcy, did any creditor, including a bank or financial in make a payment because you owed a debt?	stitution, set off an	у
	✓ No ☐ Yes	. Fill in the details.			
12.		l year before you filed for bankrup s, a court-appointed receiver, a cu	tcy, was any of your property in the possession of an istodian, or another official?	assignee for the be	enefit of
	✓ No ☐ Yes				
Pa	art 5:	List Certain Gifts and Con	tributions		
13.	Within 2	2 years before you filed for bankru	ptcy, did you give any gifts with a total value of more	than \$600 per pers	on?
	✓ No ☐ Yes	. Fill in the details for each gift.			
14.	Within 2 to any c	-	ptcy, did you give any gifts or contributions with a tot	al value of more tha	an \$600
	✓ No ☐ Yes	. Fill in the details for each gift or co	ntribution.		
Pa	art 6:	List Certain Losses			
15.		l year before you filed for bankrup saster, or gambling?	tcy or since you filed for bankruptcy, did you lose any	rthing because of t	heft, fire,
	□ No ✓ Yes	. Fill in the details.			
	cribe the loss occ	e property you lost and how urred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pendin insurance claims on line 33 of Schedule A/B: Property.	•	Value of property lost
GΔI	MRI ING	I OSSES	N/A	2018	\$5,000.00

Debtor 1 ASHLEY MARIE		IARIE	SORIANO		Case number (if	Case number (if known)		
P	art 7:	List Cer	tain P	ayments or	Transfers			
16.	16. Within 1 year before you filed for bankru anyone you consulted about seeking ba						or transfer any pro	perty to
	Include any attorneys, bankruptcy petition			ruptcy petition p	oreparers, or credit counseling	agencies for services requi	red for your bankrupt	cy.
	□ No ✓ Yes	s. Fill in the d	letails.					
					Description and value of a	ny property transferred	Date payment or transfer was	Amount of payment
	on Who V	of Nathan Vas Paid	R. Zeit	zer, Lta.	_		made	paymon
232	2 Court	St.			_			\$825.00
Num	nber Str	reet						
_					_			
Rei City	no		NV State	89501 ZIP Code	_			
					_			
Ema	iil or websi	ite address						
Pers	on Who M	Made the Payme	ent, if Not	You	_			
17.	Within	1 year before	e you fi	led for bankru	ptcy, did you or anyone else	acting on your behalf pay	or transfer any pro	perty to
	-	•			with your creditors or to make	e payments to your credit	ors?	
		include any p	ayment	or transfer tha	t you listed on line 16.			
	✓ No ☐ Yes	s. Fill in the d	details.					
18.		-	-		ruptcy, did you sell, trade, or rse of your business or finan		operty to anyone, ot	her than
		Ū			s made as security (such as gr have already listed on this state	•	or mortgage on your	property).
	√ No							
	-	s. Fill in the d	details.					
19.		-	-		kruptcy, did you transfer any named called asset-protection devices		trust or similar devic	e of which
	✓ No ☐ Yes	s. Fill in the d	details.					

Deb	Debtor 1 ASHLEY MARIE SORIANO			Case number (if known)				
P	Part 8: List Certain Financial Accounts, Instrur			uments, Safe Deposit Boxes, and Storage Units				
20.		1 year before you filed for bankru , closed, sold, moved, or transfer		ounts or instruments held	d in your name, or fo	r your		
		checking, savings, money market, pension funds, cooperatives, asso			s in banks, credit unio	ns, brokerage		
	□ No ☑ Yes	s. Fill in the details.						
116	BANK		Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer		
		ncial Institution	– XXXX-	☆ Checking	2019	\$0.00		
	NO, NV aber Str	reet		✓ Checking✓ Savings✓ Money market✓ Brokerage✓ Other		ψυ.υυ		
City		State ZIP Code	_					
21.	for sec	now have, or did you have within urities, cash, or other valuables? s. Fill in the details.	•	bankruptcy, any safe depo	osit box or other dep	oository		
22.	☑ No	ou stored property in a storage under the storag	nit or place other than your I	nome within 1 year before	you filed for bankru	iptcy?		
Р	art 9:	Identify Property You Ho	ld or Control for Some	one Else				
23.	-	i hold or control any property that I in trust for someone.	t someone else owns? Inclu	de any property you borr	owed from, are stori	ng for,		
	✓ No ☐ Yes	s. Fill in the details.						

Debtor 1 **ASHLEY MARIE SORIANO** Case number (if known) **Part 10: Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar item. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental **☑** No ☐ Yes. Fill in the details. 25. Have you notified any governmental unit of any release of hazardous material? ☐ Yes. Fill in the details. 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. **☑** No ☐ Yes. Fill in the details. Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Yes. Fill in the details below.

Debtor 1	ASHLEY MARIE SORIANO	Case number (if known)
Part 12:	Sign Below	
that answer property by	s are true and correct. I understand	nancial Affairs and any attachments, and I declare under penalty of perjury that making a false statement, concealing property, or obtaining money or the case can result in fines up to \$250,000, or imprisonment for up to 20 years,
	LEY MARIE SORIANO MARIE SORIANO, Debtor 1	X Signature of Debtor 2 Date
Did you atta	ach additional pages to Your Statem	ent of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
☑ No ☐ Yes		
Did you pay	or agree to pay someone who is no	t an attorney to help you fill out bankruptcy forms?
✓ No ☐ Yes. Na	ame of person	Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in this information to identify your case:				
ASHLEY First Name	MARIE Middle Name	SORIANO Last Name		
		Last Name		
ikruptcy Court to	or the: DISTRICT OF	NEVADA		
	ASHLEY First Name First Name	ASHLEY MARIE First Name Middle Name		

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: **List Your Creditors Who Hold Secured Claims**

For any creditors that you listed in Part 1 of Schedule D: Creditors Who Hold Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral

What do you intend to do with the property that secures a debt?

Did you claim the property as exempt on Schedule C?

None.

List Your Unexpired Personal Property Leases Part 2:

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will this lease be assumed?

None.

Part 3: Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and personal property that is subject to an unexpired lease.

X /s/ ASHLEY MARIE SORIANO	X
ASHLEY MARIE SORIANO, Debtor 1	Signature of Debtor 2
Date	Date
MM / DD / YYYY	MM / DD / YYYY

B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT DISTRICT OF NEVADA RENO DIVISION

In	re ASHLEY MARIE SORIANO	Case No			
		Chapter <u>7</u>			
	DISCLOSURE OF COMPENSATION OF ATTORNI	EY FOR D	DEBTOR		
1.	1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) a that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy cas is as follows:				
	For legal services, I have agreed to accept	\$8	25.00		
	Prior to the filing of this statement I have received		25.00		
	Balance Due		\$0.00		
2.	The source of the compensation paid to me was: ☐ Debtor ☐ Other (specify)				
3.	The source of compensation to be paid to me is:				
	✓ Debtor				
4.	1. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.				
	☐ I have agreed to share the above-disclosed compensation with another person associates of my law firm. A copy of the agreement, together with a list of the na compensation, is attached.				
5.	In return for the above-disclosed fee, I have agreed to render legal service for all asp	pects of the b	pankruptcy case, including:		
	a. Analysis of the debtor's financial situation, and rendering advice to the debtor in a bankruptcy;	determining w	whether to file a petition in		
	b. Preparation and filing of any petition, schedules, statements of affairs and plan w	hich may be	required;		

c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

I certify that the foregoing is a compl representation of the debtor(s) in this ba	CERTIFICATION ete statement of any agreement or arrange ankruptcy proceeding.	ment for payment to me for
	/s/ Nathan R. Zeltzer	
Date	Nathan R. Zeltzer The Law Office of Nathan R. Ze	Bar No. 5173
	232 Court St.	, Eta
	Reno, NV 89501	
	Phone: (775) 786-9993 / Fax: (775) 329-7220

/s/ ASHLEY MARIE SORIANO

ASHLEY MARIE SORIANO

UNITED STATES BANKRUPTCY COURT DISTRICT OF NEVADA RENO DIVISION

IN RE: ASHLEY MARIE SORIANO CASE NO

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.					

Signature _____

Case 19-50728-btb Doc 1 Entered 06/20/19 11:01:38 Page 60 of 64

Chapter: 7

Advance America 2855 N. McCarran Blvd, Ste 104 3820 N LOUISE AVE Sparks, NV 89431

First Premier Bank SIOUX FALLS, SD 57107

One Nevada Credit Union 2645 S. Mojave Road Las Vegas, NV 89121

Bank of America PO Box 15290 Wilmington, DE 19850

GLOBAL PAYMENTS CHECK SE PO BOX 661158 CHICAGO, IL 60666

Pitts Orthodontics 4786 Coughlin Pkwy #305 Reno, NV 89519

Capital One PO Box 30281 Salt Lake City, UT 84130

IRS PO Box 7346 Philadelphia, PA 19101 PROFFESIONAL FIN. CORP. 918 10TH ST. GREELEY, CO 80631

Cash 1 5890 S. Virgina Street Reno, NV 89502

JUAN SORIANO 1205 WISTLER CT. RENO, NV 89506

PROGRESSIVE LEASING LLC 256 W DATA DRIVE DRAPER, UT 84020

CASHCO 495 KEYSTONE AVE#B RENO, NV 89503

Lab Corp 604 W. Washington St. Carson City, NV 89703

Renown Regional Medical Center 1155 Mill Street Reno, NV 89502

Commenity Bank PO Box 182125 Columbus, OH 43218 Mavrick Finance PO Box 3146 Spartanburg, SC 29304

Sierra Air, Inc. 4875 Longley Ln. Reno, NV 89502

CONSERVE 200 CROSSKEYS OFFICE PARK FAIRPORT, NY 14450

Minute Loan Center 1100 E. Plumb Lane SUITE A Reno, NV 89502

Sun Loans 4932 S. Virginia Street Reno, NV 89502

Credit One Bank PO Box 98872 Las Vegas, NV 89193 Money Tree 2905 CLEAR ACRE LANE RENO, NV 89512

TBOM-GENESIS RETAIL PO BOX 8099 NEWARK, DE 19714

EOS CCA 700 LONGWATER DR NORWELL, MA 02061 National Business Factor 969 Mica Drive Carson City, NV 89705

The Villas at Keystone Canyon 3030 Leadership Parkway Reno, NV 89503

Family Finance C/O Royal Management 25331 IH 10 West Ste 101 San Antonio, TX 78257

NEVADA TITLE LOANS 961 S. VIRGINIA STREET RENO, NV 89502

US AUTO TITLE 4101 S. VIRGINA STREET RENO, NV 89502

Case 19-50728-btb

Debtor(s): ASHLEY MARIE SORIANO

Case 19-50728-btb

Doc 1
Case No:
Chapter: 7

Case No:
Chapter: 7

US BANK PO BOX 108 SAINT LOUIS, MO 63166

Wells Fargo PO Box 94435 Albuquerque, NM 87199

Fill in this information to identify your case:			
ASHLEY	MARIE	SORIANO	
First Name	Middle Name	Last Name	
First Name	Middle Name	Last Name	
kruptov Court fo	or that DISTRICT OF	NEVADA	
Krupicy Court it	of the. DISTRICT OF	NEVADA	
	ASHLEY First Name First Name	ASHLEY MARIE First Name Middle Name	

Official Form 122A-1

1.

Chapter 7 Statement of Your Current Monthly Income

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.

Part 1: **Calculate Your Current Monthly Income**

What is	s your marital and filing status? Check one only.				
Not married. Fill out Column A, lines 2-11.					
□ M	arried and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.				
Married and your spouse is NOT filing with you. You and your spouse are:					
V	Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.				
	Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).				

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

Oaksman A Oaksman D

		Column A	Column B
		Debtor 1	Debtor 2 or non-filing spouse
2.	Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$3,264.00	\$0.00
3.	Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$0.00	\$0.00
4.	All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$0.00	\$0.00

Deb	otor 1	ASHLEY MARIE SORIAN	0		c	ase number (if k	nown)	
						Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
5.	Net inc	come from operating a busine	ess, profession, o	r farm				
			Debtor 1	Debtor 2				
	Gross i	receipts (before all ions)	\$0.00	\$0.00				
	Ordina: expens	ry and necessary operating -	\$0.00	\$0.00	Сору			
		onthly income from a business, sion, or farm	\$0.00	\$0.00	here →	\$0.00	\$0.00	
6.	Net inc	come from rental and other re	eal property					
			Debtor 1	Debtor 2				
	Gross i	receipts (before all ions)	\$0.00	\$0.00				
	Ordina: expens	ry and necessary operating -	\$0.00	\$0.00	Сору			
		onthly income from rental or eal property	\$0.00	\$0.00	here →	\$0.00	\$0.00	
7.	Interes	et, dividends, and royalties				\$0.00	\$0.00	
8.	Unemp	oloyment compensation				\$0.00	\$0.00	
		enter the amount if you conter under the Social Security Act.						
	For	you		\$0.0	00			
	For	your spouse		\$0.0	00			
9.		on or retirement income. Do no penefit under the Social Securi	·	ount received that		\$0.00	\$0.00	
10.	amoun or payr or inter	e from all other sources not I t. Do not include any benefits nents received as a victim of a national or domestic terrorism. te page and put the total below	received under the war crime, a crime If necessary, list o	Social Security A against humanity	ct ,			
11		mounts from separate pages, i	•		 		+	
11.	Add lin	ate your total current monthles 2 through 10 for each column	nn.	_		\$3,264.00	+ \$0.00	\$3,264.00
	Then a	dd the total for Column A to the	e total for Column E	3.	L			Total current monthly income

Debtor 1 **ASHLEY MARIE SORIANO** Case number (if known) Part 2: **Determine Whether the Means Test Applies to You** 12. Calculate your current monthly income for the year. Follow these steps: \$3,264.00 → 12a. X 12 Multiply by 12 (the number of months in a year). \$39,168.00 12b. The result is your annual income for this part of the form. 12h 13. Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. Nevada Fill in the number of people in your household. 2 \$63,330.00 To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. 14b. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Part 3: Sign Below By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. X /s/ ASHLEY MARIE SORIANO

X /s/ ASHLEY MARIE SORIANO ASHLEY MARIE SORIANO, Debtor 1

Signature of Debtor 2

Date MM / DD / YYYY

Date MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.